



Teen Assistant Application

Date submitted _____

Date approved _____

Please print legibly

Name (Last) _____ (First) _____

Address _____ City _____ Zip _____

Home Phone _____ E-Mail _____

Cell Phone _____ Birthdate _____

Days and times of availability: Wed. _____ Thurs. _____
Fri. _____ Sat. _____

Have you assisted at a library before? _____ Where? _____

How did you hear about the Library Assistant program? _____

Do you have community service hours assigned by school or other organization? _____

If yes, how many hours? _____ By what date? _____

Name of organization _____

Teen Volunteer's Emergency Information

Emergency Contact Person _____ Phone _____

Alternate Contact _____ Phone _____

Library staff has permission to release teen volunteer to emergency contact people listed above.

Parent Signature: _____

MEDICAL INFORMATION

Regular Medications _____

Physical or Mental disabilities or limitations _____

Chronic conditions (Allergies, diabetes, other) _____

Please alert library staff to allergies that may affect volunteer work, such as allergies to dust, latex, and chemicals that may be found in cleansing solutions or any other type of allergy you may come into contact with at the library.

Teen Volunteer Agreement

I understand that I am making a time commitment to be a volunteer at the Hemet Public Library. I understand that I am responsible for, and will take responsibility for, my actions, language, and assignments. I will treat other volunteers, library staff, and patrons with respect and courtesy.

- I know I will be required to shelve books.
- I know that I am not allowed to download anything to the library computers.
- I will not play computer games during my volunteer hours.
- I will abide by the library dress code and dress in an appropriate manner with the understanding that I am representing the City of Hemet in a work environment: no open-toed shoes, no shorts or shirts above the knee, no tank tops. I will wear a teen volunteer lanyard OR a volunteer vest while I am assisting.
- I will not use my cell phone or listen to a music device while I am volunteering.
- I will not leave the library without signing-out and telling staff.
- I understand that the library is NOT responsible for my personal belongings. I understand that lockers are available to store my belongings. I understand that I must provide my own bike lock to secure my bike to the outdoor bicycle rack.
- I will not use foul language in the library.
- I will alert staff to any problems, uncomfortable situations, or injuries that may occur.
- I will not chew gum during my volunteer hours.
- I will respect the staff areas of the library and will not bring friends into staff areas including behind the service desks.
- I understand that I must let library staff know if I am unable to make it to my volunteer hours. The library's phone number is (951) 765-2440. I understand that if I have 2 no-shows without letting staff know of my absence ahead of time that I will be dismissed from the volunteer program.

Furthermore, I agree to comply with the Hemet Public Library policies and procedures. I agree to respect the confidential nature of information I may obtain at the library. I also agree to participate in orientation and training as required. I certify that all statements made in this application are true and complete to the best of my knowledge and belief. I agree and understand that any misstatement or omission of material fact on this application may be cause for forfeiture on my part of all rights of assisting at the Hemet Public Library.

Print Volunteer Name

Volunteer signature

Date

Parent signature

Date

